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2700 First Indiana Plaza
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Indianapolis, Indiana 46204
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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Atty. Docket: 8266-1126

Applicants: Zerhusen et al.

Title: BED SIDERAILS
HAVING FLEXIBLE PORTIONS

Serial No.: 10/644,122

Filed: August 20, 2003

Examiner: Lee, Jong Suk

Group: 3673

Certificate Under 37 CFR 1.8(a)

I hereby certify that this paper or fee is being transmitted
via facsimile (703) 872-9306 and addressed to: Mail
Stop Non-Fee Amendment, Commissioner for Patents,
P.O. Box 1450, Arlington, VA 22313-1450.

on December 8, 2004

Brenda Vandover
Brenda Vandover

Dated: December 8, 2004

AMENDMENT AND REPLY
UNDER 37 U.S.C. § 1.111

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Arlington, VA 22313-1450

Dear Sir:

Responsive to the Office Action mailed October 8, 2004, Applicants submit the
following amendments and remarks for the Examiner's consideration.

Amendments to the Specification begin on page 2.

Claims begin on page 3.

Remarks begin on page 6.

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ATTORNEYS AT LAW

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E-Mail: COrich@boselaw.com**FAX TRANSMITTAL SHEET****Date/Time:** December 8, 2004

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TO

Examiner Lee

Art Group 3673

FAX NO.

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User Number: 872 **Client #:** 8266 **Matter #:** 1126**Total number of pages transmitted including cover sheet:** 15**Comments:**

Sent by fax: December 8, 2004

Applicants: Zerhusen et al.

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Atty. Docket: 8266-1126

☒ Amendment and Reply Under 37 U.S.C. §1.111☒ Amendment Transmittal

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on December 8, 2004


Brenda Vandever

Dated: December 8, 2004

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is a response in the above-identified application:

The fee has been calculated as shown below:

CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	NUMBER EXTRA	RATE	FEE
TOTAL CLAIMS (37 C.F.R. 1.16(c))	28	28	0	\$18	\$0
INDEPENDENT CLAIMS (37 C.F.R. 1.16(b))	8	8	0	\$88	\$0
If applicant has small entity status under 37 C.F.R. 1.9 and 1.27, then divide total fee by 2, and enter amount here.			SMALL ENTITY TOTAL	NO	\$0
TOTAL FEE FOR ADDITIONAL CLAIMS					\$0

*If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

**If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

An Extension of Time for _____ month(s) is hereby requested under
37 C.F.R. 1.136(a). The required fee for filing this extension is: _____

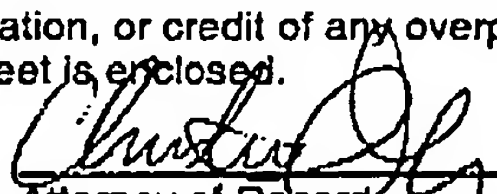
Information Disclosure Statement _____

TOTAL FEE FOR THIS AMENDMENT

\$0

A check in the amount of \$0 to cover the total fee for this
amendment is attached.

The Commissioner is hereby authorized to charge any additional filing fees under 37 C.F.R. 1.16 or processing fees under 37 C.F.R. 1.17 which may be required during the prosecution of this application, or credit of any overpayment, to Bose McKinney & Evans LLP's Deposit Account No. 02-3223. A duplicate copy of this sheet is enclosed.


Attorney of Record
Printed Name: Christine E.M. Orlich
Registration No.: 44,987

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